

HOUSE BILL 641

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By: **Delegates Nathan–Pulliam, Branch, Braveboy, Burns, Costa, Elliott, Gaines, Gutierrez, Howard, Hubbard, Ivey, Jones, Kipke, Krebs, Morhaim, Murphy, Oaks, B. Robinson, Tarrant, and V. Turner**

Introduced and read first time: February 8, 2012

Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

2 **Hepatitis B and Hepatitis C Viruses – Public Awareness, Treatment, and**
3 **Outreach**

4 FOR the purpose of requiring the Department of Health and Mental Hygiene, as funds
5 are available, to conduct a certain needs assessment, initiate a certain
6 statewide public awareness campaign, solicit certain funding, and review and
7 recommend certain initiatives related to the hepatitis B virus; requiring the
8 Department, as funds are available, to coordinate with the Maryland Office of
9 Minority Health and Health Disparities to activate certain hepatitis B virus and
10 hepatitis C virus plans; requiring the Department, as funds are available, to
11 develop a certain plan and certain recommendations and to collaborate with the
12 Maryland Insurance Administration to make certain recommendations
13 regarding certain insurance coverage; requiring the Maryland Health Care
14 Commission to examine certain research findings and make a certain report to
15 the Governor and certain committees of the General Assembly on or before a
16 certain date; repealing the termination date for provisions of law that require
17 the Department to conduct certain outreach and public awareness campaigns
18 and make certain reports regarding the hepatitis C virus; and generally relating
19 to public awareness, treatment, and outreach relating to the hepatitis B and
20 hepatitis C viruses.

21 BY repealing and reenacting, with amendments,
22 Article – Health – General
23 Section 18–1001
24 Annotated Code of Maryland
25 (2009 Replacement Volume and 2011 Supplement)

26 BY repealing and reenacting, without amendments,
27 Article – Health – General

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 Section 18–1002
2 Annotated Code of Maryland
3 (2009 Replacement Volume and 2011 Supplement)

4 BY repealing and reenacting, with amendments,
5 Chapter 457 of the Acts of the General Assembly of 2006, as amended by
6 Chapter 125 of the Acts of the General Assembly of 2009
7 Section 4

8 Preamble

9 WHEREAS, There are approximately 5,300,000 individuals with hepatitis B,
10 hepatitis C, or both living in the United States; and

11 WHEREAS, Hepatitis B and hepatitis C are viral infections that attack the
12 liver and can cause both acute and chronic disease; and

13 WHEREAS, One in 20 Americans has been infected with hepatitis B; and

14 WHEREAS, The Centers for Disease Control has recognized hepatitis B as the
15 deadliest vaccine–preventable disease; and

16 WHEREAS, Hepatitis C is three to four times more prevalent than human
17 immunodeficiency virus (HIV) and is much more infectious than HIV; and

18 WHEREAS, Hepatitis B and hepatitis C disproportionately affect minority
19 populations, including African Americans, Hispanics, American Indian/Native
20 Americans as well as Asian and Pacific Islanders; and

21 WHEREAS, The annual health care costs attributable to hepatitis B are
22 estimated to be approximately \$2,000 per infected individual and the annual health
23 care costs attributable to treating hepatitis C with protease inhibitors are
24 approximately \$30,000 per infected individual; and

25 WHEREAS, Direct antibodies treatment of hepatitis C, a newer treatment, is
26 associated with a 91% to 94% cure rate; and

27 WHEREAS, Hepatitis B and hepatitis C patients who progress to end–stage
28 liver disease may require treatments costing between \$30,980 and \$110,576 per
29 hospital admission, and hepatitis B and hepatitis C patients who are diagnosed too
30 late may require a liver transplant costing at least \$314,000; and

31 WHEREAS, The Centers for Disease Control has revised its vaccine
32 recommendations to include vaccination at birth, vaccination of all previously
33 unvaccinated children and adolescents, and vaccination of previously unvaccinated
34 adults at risk for hepatitis B infection in an effort to eliminate hepatitis B from the
35 United States; and

1 WHEREAS, There is no vaccination for hepatitis C; and

2 WHEREAS, According to the Institute of Medicine, hepatitis B and hepatitis C
3 infections cause substantial morbidity and mortality despite being preventable and
4 treatable; now, therefore,

5 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
6 MARYLAND, That the Laws of Maryland read as follows:

7 **Article – Health – General**

8 18–1001.

9 As funds are available, the Department shall:

10 (1) Conduct a needs assessment to determine the incidence of the
11 **HEPATITIS B VIRUS AND** hepatitis C virus in the State;

12 (2) Initiate a statewide public awareness campaign targeting
13 vulnerable populations and health care providers in the State to urge **HEPATITIS B**
14 **VIRUS AND** hepatitis C virus education and testing;

15 (3) Coordinate with other units of State government, including the
16 Department of Public Safety and Correctional Services and the Veterans'
17 Administration, to activate a hepatitis C virus plan for the education, testing, and
18 treatment of the populations within the jurisdiction of the units;

19 (4) Solicit funding from the private sector and units of federal, state,
20 and local government for **HEPATITIS B VIRUS AND** hepatitis C virus outreach;

21 (5) Provide funding for hepatitis C virus pilot programs, which may
22 include programs in methadone clinics or programs for the Department of Correctional
23 Services population;

24 (6) Review and recommend initiatives to promote advocacy, education,
25 physician outreach, and awareness of the **HEPATITIS B VIRUS AND** hepatitis C virus;

26 (7) Assess the feasibility of creating a Hepatitis C Virus
27 Administration in the Department and examine methods to maximize existing
28 resources to raise awareness of the hepatitis virus; [and]

29 (8) Implement the 2005 Report of the Hepatitis C Advisory Council;

30 **(9) COORDINATE WITH THE MARYLAND OFFICE OF MINORITY**
31 **HEALTH AND HEALTH DISPARITIES TO DEVELOP AND ACTIVATE A HEPATITIS B**

1 VIRUS PLAN AND A HEPATITIS C VIRUS PLAN FOR THE EDUCATION, TESTING,
2 AND TREATMENT OF ETHNIC AND RACIAL POPULATIONS WHO ARE AFFECTED
3 DISPROPORTIONATELY BY THE HEPATITIS B AND HEPATITIS C VIRUSES,
4 INCLUDING THE ASIAN POPULATION AND AFRICAN IMMIGRANTS;

5 (10) DEVELOP A PLAN TO INCREASE THE AVAILABILITY AND
6 PROVISION OF HEPATITIS B VIRUS VACCINATIONS IN THE STATE, IN
7 ACCORDANCE WITH RECOMMENDATIONS FROM THE CENTERS FOR DISEASE
8 CONTROL;

9 (11) DEVELOP RECOMMENDATIONS TO IMPROVE THE AWARENESS
10 AND THE AFFORDABILITY OF MEDICATIONS FOR TREATING THE HEPATITIS C
11 VIRUS; AND

12 (12) COLLABORATE WITH THE MARYLAND INSURANCE
13 ADMINISTRATION TO MAKE RECOMMENDATIONS REGARDING INSURANCE
14 COVERAGE FOR COMPLICATIONS ASSOCIATED WITH MEDICATIONS USED FOR
15 THE TREATMENT OF THE HEPATITIS C VIRUS.

16 18-1002.

17 On or before December 1, 2006, and annually thereafter, the Department shall
18 report to the Governor and, in accordance with § 2-1246 of the State Government
19 Article, to the Senate Education, Health, and Environmental Affairs Committee and
20 the House Health and Government Operations Committee on the activities of the
21 Department in implementing § 18-1001 of this subtitle.

22 **Chapter 457 of the Acts of 2006, as amended by Chapter 125 of the Acts of**
23 **2009**

24 SECTION 4. AND BE IT FURTHER ENACTED, That this Act shall take effect
25 July 1, 2006. [Section 2 of this Act shall remain effective for a period of 7 years and, at
26 the end of June 30, 2013, with no further action required by the General Assembly,
27 Section 2 of this Act shall be abrogated and of no further force and effect.]

28 SECTION 2. AND BE IT FURTHER ENACTED, That the Maryland Health
29 Care Commission shall:

30 (1) examine research findings related to health disparities in the
31 effectiveness of medical treatment of African Americans with hepatitis C and make
32 recommendations for protocols for treating African Americans who have hepatitis C;
33 and

34 (2) on or before December 1, 2012, report its findings and
35 recommendations to the Governor and, in accordance with § 2-1246 of the State

1 Government Article, to the Senate Education, Health, and Environmental Affairs
2 Committee and the House Health and Government Operations Committee.

3 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect
4 July 1, 2012.